



IFW

CASE LA0120 NP

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Jonathan N. Provoost  
Type or print name

Signature

Date

Oct 19, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

Art Unit: 1614

RYONO ET AL.

APPLICATION NO: 10/826,100

FILED: APRIL 15, 2004

FOR: THYROID RECEPTOR LIGANDS

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

Applicants believe this paper is being filed before the mailing date of a first Office Action on the merits, and so under 37 C.F.R. §1.97(b)(3) no fees are required. If a fee is deemed to be required, the Commissioner is hereby authorized to charge such fee to Deposit Account No. 19-3880.

In accordance with 37 C.F.R. §1.56, applicants wish to call the Examiner's attention to the reference cited on the attached form(s) PTO-1449.

Copy of this reference is enclosed herewith.

The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).

Respectfully submitted,



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Date Oct 19, 2004

## INFORMATION DISCLOSURE CITATION

ATTY. DOCKET NO.  
LA0120 NP  
APPLICATION NO.  
10/826,100  
APPLICANT  
RYONO ET AL.  
FILING DATE  
APRIL 15, 2004Group  
1614

(Use several sheets if necessary)

## U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA	6,090,854	7/18/00	Epperson			
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						

## FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
	AM						<input type="checkbox"/>	<input type="checkbox"/>
	AN						<input type="checkbox"/>	<input type="checkbox"/>
	AO						<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>
	AQ						<input type="checkbox"/>	<input type="checkbox"/>

## OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AR	
	AS	
	AT	

EXAMINER

DATE CONSIDERED

\*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.